

## COVER SHEET FOR AMENDMENT OF POST-TRAVEL SUBMISSION

Instructions: Use this form as a cover sheet for any paperwork you may need to submit to the Office of Public Records in order to make your Privately Sponsored Post-Travel Submission complete in accordance with Rule 35. Only complete this form if you need to submit an amendment to a post-travel fliing you have already submitted.

## SUBMIT DIRECTLY TO THE OFFICE OF PUBLIC RECORDS IN 232 HART BUILDING

Matthew Klapper Name of Traveler: Booker	
Employing Office/Committee:	
The Pew Charital Private Sponsor(s) (List all):	ble Trusts
September 15-17, 2017 Travel Date(s):	•
Description/Title of Attached Forms:	
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<u></u>	· · · · · · · · · · · · · · · · · · ·
Purpose of Amendment (describe the reason fo	Post-travel submission Post-travel submission
•	r amending original submission):
Purpose of Amendment (describe the reason for must be amended with the Office of Public	r amending original submission):

## **Employee Post-Travel Disclosure of Travel Expenses**

Date/Time Stamp:					

Post-Travel Filing Interest travel. Submit all form	structions: Complete s to the Office of Pub	this form within 30 day lic Records in 232 Har	ys of returning from the Building.	
In compliance with Ru be reimbursed/paid for			sures with respect to	travel expenses that have been or wi
☐ The <u>original</u> <i>Emplo</i> ☐ A <u>copy</u> of the <i>Priva</i>	yee Pre-Travel Author te Sponsor Travel Cer The Pew Cha	rization (Form RE-1), <u>A</u> tification Form with all ritable Trusts	AND attachments (itinerary	y, invitee list, etc.)
Private Sponsor(s) (list				· · · · · · · · · · · · · · · · · · ·
Septe Fravel date(s):	mber 15-17, 2017			
\		Victoria Edelma	n	
Name of accompanying	<del>-</del>	ny): Child	. <u>.</u>	<u>.                                    </u>
Relationship to Travele	er: Est Spouse Live	Cilliu		
F THE COST OF LODGING CONCLUDE LODGING CONTROL Employe	OSTS IN EMPLOYEE	EASE DUE TO THE ACC EXPENSES. (Attach addit	COMPANYING SPOUS tional pages if necessary	SE OR DEPENDENT CHILD, ONLY
CAPCHOCO IOI ZIII PION	Transportation Expenses	Lodging Expenses	Meal Expenses	Other Expenses (Amount & Description)
☐ Good Faith Estimate	\$116.27	\$286.00	\$128.00	
Actual Amount				
Expenses for Accomp	anying Spouse or De	pendent Child (if applic	able):	
	Transportation Expenses	Lodging Expenses	Meal Expenses	Other Expenses (Amount & Description)
☐ Good Faith Estimate				
☐ Actual Amount				
hecessary.): see atta	of all meetings and evached document	ents attended. See Sena	te Rule 35.2(c)(6). (A	Attach additional pages if
፡ <del></del>	<u> </u>	<u> </u>		
9 10 18 17	Matthew	Klapper		(Signature of traveler)
(Date)	(Printed)	name of trateler)		(Signature of traveler)
TO BE COMPLETE	D BY SUPERVISING	MEMBER/OFFICER:		
I have made a determing Authorization form, and	ination that the expens re necessary transports	es set out above in connation, lodging, and relate	ections with travel de ed expenses as defined	scribed in the <i>Employee Pre-Travel</i> in Rule 35.
10/18/17			<u>/</u>	amining Canatan/Offican)
(Date)			(Signature of Supe	ervising Senator/Officer)

(Revised 1/3/11)

Form RE-2